Entity Name: Kiwawis Club of Control BASTAL Rouge Foundation, INC.
Address: 929 Government St.; Brown Rouge, M. 70802
Telephone: 225 - 953 - BBOU Email: FALLEST @ GUARANTY CORPO, COM
This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to <a href="mailto:ereports@lla.la.gov">ereports@lla.la.gov</a> , faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.
AFFIDAVIT
Personally came and appeared before the undersigned authority, Follows [1] (officer's
name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all
material respects, the financial position of the works the financial position of the financial p
of 9/30/2022 (entity's year-end) and the results of operations for the year then ended, in
accordance with the basis of accounting described within the accompanying financial statements; that the
entity has maintained a system of internal control structure sufficient to safeguard assets and comply with
laws and regulations; and that the entity has complied with all laws and regulations, except as
follows:
Complete if Applicable: In addition, Faller M// (officer's name), who duly swom,
deposes, and says that Warris Clup or Corona (entity's name) received \$75,000 or less
in revenues and other sources for the year ended 9/3 / (entity's year-end), and accordingly,
is not required to have an audit for the previously mentioned fiscal year.
is not required to make an addition the provisions, inclinence riseas year.
7 1 17 -
OFFICER'S SIGNATURE OFFICER'S TITLE
OFFICER'S SIGNATURE OFFICER'S TITLE
Sworn to and subscribed before me, this 4th day of March, 2073
Sworn to and subscribed before me, this day of, 20_23_
MIM
William H. Caldwell, Notary Public NOTARY PUBLIC SIGNATURE State of Louisiana
My Commission Expires at Death
LA Bar Roll #38152

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - Updated 02/23

Entity Name: Kiwarts Chan or Corona B. h. Fiscal Year End: 9/20/2020

## Statement of Receipts and Disbursements

### Statement A

	_	General Fund	Other Fund		Total
RECEIPTS (Provide Brief Description):  1. NET PROSESS GROW GENSTRAMES PMC	£5	38,691	\$	_ \$	38,691
3. City of Barrel Rouge	=	7,000		==	7,000
5. 6. Total receipts (add lines 1 - 5)	\$	39.691	\$	\$	38,691
DISBURSEMENTS (Provide Brief Description): 7. Grand Continues 8. Occupied Continues	\$	5,238	\$	\$	5238
9. 10.	=	612			
11. 12.	<u>-</u>	5,931	<u>s</u>	- <del>-</del>	-63
Total Disbursements (add lines 7 - 12)      Change in fund balance (Lines 6 minus 13)	9	3,751 FZ 760	S .	= <del>=</del> \$	22.760
15. Fund Balance at beginning of year  16. Fund balance (deficit) at end of year (Add lines 14-15)	\$	45563	\$	\$	45,503
This amount also goes on line 12, Statement B	\$	78,343	\$	_ <u>\$</u>	78,343

Identify the Basis of Accounting, if not using Cash-Basis?

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Entity Name: Winders Class us Comme B. A. Fiscal Year End: 9/80/2020

#### **Balance Sheet** Statement B Other General Total Fund Fund ASSETS (balances at year-end) \$ 79,343 1. Cash and cash equivalents 2. Investments (fair value) 3. Office furnishings (Cost of desks, etc) 4. Equipment (Cost of fax machine, etc) 5. Other (brief description) \$ 78,343 S \$ 78,343 6. Total Assets (add lines 1 - 5) LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): 9. 10. 11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 70,343 14. Total Liabilities and Fund Balance (add lines 11 - 13) \$ 76 347 \$ \$ 79,343

Entity Name: L. Waris Cluz or Corons M. Fiscal Year End: 9/20/20
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#### Statement C

Schedule of Compensation, Bene	fits and Other	Payments to	Entity I	Head
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Agency Head's Name and Title:	NA	

Purpose	Dollar Amount
1. Salary	1. /
2. Benefits-insurance	2.
Benefits-retirement	3.
Benefits-other (describe)	4.
Benefits-other (describe)	5. /
Benefits-other (describe)	6.
7. Car allowance	7.
8. Vehicle provided by government (if reported on your W-2)	8.
9. Per diem	9.
10. Reimbursements	10.
11. Travel	11.
12. Registration fees	12.
13. Conference travel	13.
14. Housing	14.
15. Unvouchered expenses (example: travel advances, etc.)	15.
16. Special meals	16.
17. Other	17.
18. TOTAL (enter total of line 1-17)	18.

Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule only those payments to the agency head that are derived from the public funds.)